Please Select One:
☐ New Application
☐ Renewal of existing Fictitious Firm Name

## <u>Certificate of Business: Fictitious Firm Name</u> Series LLC

**Please Print or Type** 

The expiration date for such certificates shall expire after five years from the date of filing. The undersigned does hereby certify that they are conducting business in Clark County, Nevada, under the Fictitious Firm Name: **Mailing Address:** (Mailing Address for notification of renewal) Mailing Address City, State, Zip and that said firm is composed of the following series limited-liability company: Name of Series LLC: **LLC Authorizing Creation of Series:** (Must print name exactly as it is registered with the Nevada Secretary of State) Street Address of Authorizing LLC: **Mailing Address** (If different): Signed By: By signing above, I declare (or affirm), under penalty of perjury, that all statements made in this document are true, and that I have authority to sign on behalf of and to bind the above named business/legal entity to a contract. For additional signatures, please use additional pages STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_ This instrument was acknowledged before me on (Name of individual whose signature is being notarized) Signature of Notary Public/Deputy Clerk